

EMSAC Meeting

September 30th, 2026

1. Roll Call

Roll Call: Bryan Ziegler, Ben Foote, Amanda Hull, Tim Richmond, Cindy Hewitt, David Cronin, Robert Vaughn, TJ Millikin, Lori Reeves, Quincy Keck, Jean Dell, Loren McIntosh

Absent: Dr. Lyssy, Dr. Reiter, Gary Collett, Athena Sears

Others: KYOU, KTVO, Josh Chance

Meeting called to order at approximately 5:34 p.m.

2. Approve Minutes of the September 16th, 2026 Regular Meeting:

Motion to approve Cindy, 2nd Loren, all in favor

3. Present the “It Takes a System” Graphic HANDOUT

There were many edits talked about on this hand out with changing some of the verbiage

The edited version will be sent back out

Email Tim any other ideas you want edits on this handout as he will be sending out drafts when changes are made.

Edits discussed: show fire truck icons in red and make the 30% figure more prominent; clarify that 30% means no first-response (non-transport) agency arrived before the ambulance — the ambulance responded to every call — by listing the agencies under “First Response” (fire, law enforcement, volunteer EMS); add short explainers for EMD, United First Aid, first responder, and ALS/BLS; add response-time metrics for first unit on scene and ambulance (2025 data being compiled); consider “Gap” rather than “Opportunity” labels to tie items to funding needs; strike “Smarter” from the 911 Dispatch box and use “unit response protocol”; replace “1015 Transit” with generic wording; move Community Response Teams (Spoke 3) to Community & Bystanders. A question on 3,715 dispatches vs. 2,705 responses may be clarified by 2025 data.

4. Adopt Final Spoke Recommendations (All spokes were edited and Tim will provide a updated chart)

Spoke #2 was taken up first while awaiting TJ for Spoke #1.

Spoke #1: Emergency Medical Dispatch (EMD)

EMSAC recommends a phased dispatch approach: adopt a Medical Director-approved Recommended Unit Protocol at both PSAPs now and move to countywide Emergency Medical Dispatch on a single protocol platform once PSAP staffing is funded.

EMSAC position on dispatch consolidation will stay neutral: recommend phased EMD only

Vote: 1st: Bryan 2nd: Robert; Voice vote All present members voted YES

“Response matrix” and “telephone CPR” were struck; T-CPR is not available as a stand-alone certified program (it is a subset of EMD). The barrier is PSAP staffing, not software. EMD cost was cited at approx. \$117,000 start-up and \$30,000/year.

Spoke #2: Volunteer EMS and Fire Department Assists

EMSAC recommends formalizing the first response agency roles that fire and law enforcement agencies already perform countywide, with county support limited to equipment, training or other needs allowed by code.

EMSAC position for funding mechanism for first response support is in the direction of formula share of the EMS trust fund (base amount) and application-based equipment and training grants (set amounts)

Vote: 1st Bryan 2nd: Robert; Voice vote with all present members voted YES

“Volunteer/fire” was broadened to first response agencies to include law enforcement (e.g., Sheriff’s Office AEDs);

“dispatch integration” and draft items 4–5 were struck. City councils do not need to vote on this.

Spoke #3: Community Response and Assist Teams

EMSAC recommends piloting a United First Aid Volunteer response team.

EMSAC position is to stand with this written direction as stated.

Vote: 1st Cindy 2nd: Loren; Voice vote with all present members voted YES

“At one site” and the paid-team exclusion were struck. Pilot counties started with a ~\$70,000 grant; Van Buren County reports good results. The recommendation positions the county for future grants.

Spoke #4: Alternative and Non-Emergency Transport

EMSAC recommends the county act as coordinator and data provider for non-emergency transport and pursue an on-call ride concept.

EMSAC decision record adopted with amendments

Vote: 1st Ben 2nd Cindy; Voice vote with all present members voted YES

“With 1015 Transit” and the line excluding county-funded transport contracts were struck; no current data quantifies the need.

Spoke #5: Community Paramedicine/ Mobile Integrated Health (MIH)

EMSAC recommends pursuing a community paramedicine/ MIH program.

EMSAC recommends from the role of the levy in MIH- direction selected was to levy reserve available if grant funding ends and levy share of startup.

Vote: 1st Cindy 2nd Robert; Voice vote with all present members voted YES

References to ORHC as host and the ACAD model were struck. MIH has no reimbursement for sustainment; a startup share can serve as grant match.

Spoke #6: High Volume Location Interventions

THIS SPOKE WAS REMOVED

High-volume locations (largely multi-unit housing) are addressed by other spokes and the existing life-safety program.

Spoke #7: Public Education and Access Guidance

EMSAC recommends that Wapello County Emergency Management lead public education in partnership with the Wapello County EMS Association and its member agencies, using Wapello Life, social media, print materials, and other channels.

EMSAC decision recorded to adopt with amendments to what the recommendation includes.

Vote: 1st Bryan 2nd Ben; Voice vote with all present members voted YES

Struck “content kept factual once a levy question is on the ballot” (EMA platforms present facts only and will not promote the levy); named training entities changed to “training consortium”; customer feedback moved to the accountability section.

Spoke #8: EMS Academy (Training Pathway for recruitment and retention)

EMSAC recommends endorsing an EMS Academy- a training consortium as the county’s pathway to recruit, train, and retain EMS staff, and forming a workgroup to draft the Academy’s charter.

EMSAC decisions recorded to adopt with amendments to what this recommendation includes.

Vote: 1st Cindy 2nd Robert; Voice vote with all present members voted YES

Named partners (including IHCC as anchor) were struck to keep it generic. No funding request now; the charter returns to EMSAC with cost estimates.

5. Endorse the Interim Funding Strategy

Tim provided a Memorandum followed by 4 pages with detailed information on it

The group voted on consensus for approval of this release.

No levy ask will be made now; EMSAC will save one strong ask for voters after building the public operator model and its costs (levy development targeted for August 2027). Interim focus is hospital/ORMICS support and the OFD ambulance. Bryan offered to take a proposal to the other Supervisors for a county share (about one-third up to half), tied to whole-county service under an agreement. Local option sales tax is limited to capital items (e.g., ambulance/equipment). Budget timing: county ~November, hospital through December, City Council January–March; FY begins July 1, 2027.

6. Adopt the EMS System Recommendation Long-Range Work Plan

This was reviewed and all members were ok with it

Phase 1 concludes with the interim recommendation; Phase 2 studies the full public operator model.

7. Approve the Public Statement for Release

Once the meeting is held with elected officials is held this will be edited and released to the public

A press release with the spoke recommendations from this meeting will go out after this meeting due to media interest; the final report will be released after the Oct. 21 approval, before the joint meeting.

8. Request a Joint Meeting Date

We will be having a joint meeting with the elected City and County Officials on October 26th, 2026 at 5:30pm held at the Bridgeview Center

Round tables with perimeter seating for the public; ~30 members/officials expected; public questions allowed.

9. Authorize the Chair to Draft the Interim Support Request

This will be worked on by Bryan, Ben, Tim, Robert and ORHC CEO

No formal vote was taken on this item.

10. Public Comment

None

11. Set Next Meeting and Adjourn

Next Meeting will be held October 21st, 2026 at 5:30pm at the Wapello County Emergency Management Office

Purpose: approve the final 27-page report. Following schedule: Nov. 4 (interim funding requests), Nov. 18 (placeholder), December off, Jan. 13, 2027 (Phase 2 kickoff).

Adjournment at 7:48pm 1st Loren 2nd TJ all in favor

Action Items

Action	Responsible	Due
Send out edited "It Takes a System" handout and updated spoke chart	Tim	As changes are made
Email Tim any other handout edit ideas	All members	Ongoing
Interim support request	Bryan, Ben, Tim, Robert, ORHC CEO	Nov. 4 meeting
Send report edits to Tim before review meeting	All members	Before Oct. 21
Finalize, print, and post the final report	Tim	After Oct. 21; before Oct. 26
Update press release with spoke recommendations and release	Tim	After the Sept. 30 meeting
Gauge ORHC CEO's interim support needs	Robert	Before Nov. 4
Update OFD ambulance staffing models and cost estimates	Josh, Dave	Before Nov. 4